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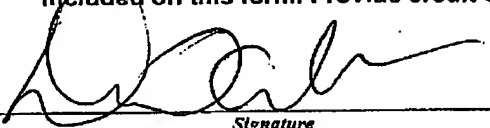
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at 860-286-2929

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CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)			Docket No. 144726/GEM-0102	
Applicant(s): Darin R. Okerlund				
Application No. 10/708,564	Filing Date March 11, 2004	Examiner Weatherby, Ellsworth	Group Art Unit 3768	
Invention: CARDIAC IMAGING SYSTEM AND METHOD FOR PLANNING MINIMALLY INVASIVE DIRECT CORONARY ARTERY BYPASS SURGERY				
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P18/REV02

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. 144726/GEM-0102	
Applicant(s): Darin R. Okerlund					
Application No. 10/708,564	Filing Date March 11, 2004	Examiner Weatherby, Ellsworth	Customer No. 23413	Group Art Unit 3768	Confirmation No. 2563
Invention: CARDIAC IMAGING SYSTEM AND METHOD FOR PLANNING MINIMALLY INVASIVE DIRECT CORONARY ARTERY BYPASS SURGERY					
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<u>COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	31 -	27 =	4	x \$50.00	\$200.00
INDEP. CLAIMS	4 -	4 =	0	x \$200.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$200.00
<input type="checkbox"/> No additional fee is required for amendment. <input checked="" type="checkbox"/> Please charge Deposit Account No. 07-0845 in the amount of \$200.00 <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 07-0845 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.					
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
 _____ <i>Signature</i>			Dated: May 16, 2007		
David Arnold Registration No. 48, 894 Cantor Colburn LLP 55 Griffin Road South Bloomfield, CT 06002 860-286-2929			I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ _____ (Date) _____ <i>Signature of Person Mailing Correspondence</i> _____ <i>Typed or Printed Name of Person Mailing Correspondence</i>		
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P11LARGE/REV10

Appln. No. 10/708,564
Docket No. 144726/GEM-0102

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln. No.:	10/708,564	:	Confirmation No.:	2563
Applicant:	Darin R. Okerlund	:	Group Art Unit:	3768
Filed:	March 11, 2004	:	Examiner:	Weatherby, Ellsworth
Docket No.:	144726/GEM-0102	:		

For: CARDIAC IMAGING SYSTEM AND METHOD FOR PLANNING
MINIMALLY INVASIVE DIRECT CORONARY ARTERY BYPASS
SURGERY

May 16, 2007

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT UNDER 37 CFR 1.111

Sir:

This is in response under 37 CFR §1.111 to the Office Action dated February 28, 2007 issued in the above-identified application, wherein Applicant requests reconsideration and entry in view of the following amendment and remarks.

Amendments to the Claims begin on page 2.

Remarks/Arguments begin on page 8.

CERTIFICATE OF MAILING OR TRANSMISSION

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<u>MaryAnn Stratton</u>	<u>MaryAnn Stratton</u>	<u>5/16/07</u>
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